

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	343	9/24/97
TYPIST	"	10/8/97
VERIFIER		" "
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

# INDEX OF CLAIMS

Claim	Date
Final	Original
1	3/20/98
2	0/5/99
3	8/9/99
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
Final	Original
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